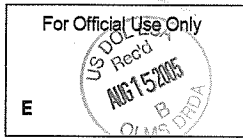


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6131</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Frank</u> <u>P</u> <u>DiMarco</u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>36170 N. Edgewater Ct.</u> City <u>Gurnee</u> State <u>Illinois</u> ZIP Code + 4 <u>60131</u>	4. Name, file number, and address of labor organization. Name <u>Machinery Movers &amp; Riggers nion Local #136</u> Labor Organization File Number <u>014-422</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>1820 Beach St.</u> City <u>Broadview</u> State <u>Illinois</u> ZIP Code + 4 <u>60155</u>
5. Position in labor organization. <u>Business Manager/FST</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>RES Exhibition Services</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>9301 W. Bryn Mawr</u> City <u>Rosemont</u> State <u>Illinois</u> ZIP Code + 4 <u>60018</u>	7.a. Nature of Interest, Transaction, or Income. <u>Christmas Party &amp; Gift Cert.</u> 7.b. Amount. <u>\$60</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Frank P. DiMarco</u>	On <u>08/11/2005</u> Date	<u>847-855-1282</u> Telephone Number



## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<b>8. Name and address of Business (including trade name, if any).</b>  Name <input type="text" value="DiMeo Schneider &amp; Associates, L.L.C."/>  Trade Name, if any: <input type="text"/>  P.O. Box, Bldg., Room No., if any <input type="text"/>  Street <input type="text" value="500 W. Madison Street, Suite #3855"/>  City <input type="text" value="Chicago"/>  State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60661"/>	<b>9. Business deals with:</b>  <input type="checkbox"/> a. Labor Organization  <input checked="" type="checkbox"/> b. Trust  <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name <input type="text" value="Local 136 pension fund"/>  Trade Name, if any: <input type="text"/>  P.O. Box, Bldg., Room No., if any <input type="text"/>  Street <input type="text" value="1820 Beach St."/>  City <input type="text" value="Broadview"/>  State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60155"/>	<b>11.a. Nature of such dealing.</b> <div><input type="text" value="Investment Consultant provides investment consulting services to the Local 136 Pension Fund"/></div> <b>11.b. Approximate dollar value of such dealing.</b> <input type="text" value="\$65,828"/>  <b>12.a. Nature of interest held or income received.</b> <div><input type="text" value="Lunch Meeting"/></div>  <b>12.b. Amount.</b> <input type="text" value="\$26"/>

## Part B Continuation Page

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<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name <input type="text" value="Local 136 pension fund"/> Trade Name, if any: <input type="text"/> P.O. Box, Bldg., Room No., if any <input type="text"/> Street <input type="text" value="1820 Beach St."/> City <input type="text" value="Broadview"/> State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60155"/>	<b>11.a. Nature of such dealing.</b> <input type="text" value="Investment Consultant provides investment consulting services to the Local 136 Pension Fund"/>  <b>11.b. Approximate dollar value of such dealing.</b> <input type="text" value="\$65,828"/>
	<b>12.a. Nature of interest held or income received.</b> <input type="text" value="Lunch Meeting"/>  <b>12.b. Amount.</b> <input type="text" value="\$30"/>

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<b>8. Name and address of Business (including trade name, if any).</b>  Name <input type="text" value="DiMeo Schneider &amp; Associates, L.L.C."/>  Trade Name, if any: <input type="text"/>  P.O. Box, Bldg., Room No., if any <input type="text"/>  Street <input type="text" value="500 W. Madison Street, Suite #3855"/>  City <input type="text" value="Chicago"/>  State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60661"/>	<b>9. Business deals with:</b>  <input type="checkbox"/> a. Labor Organization  <input checked="" type="checkbox"/> b. Trust  <input type="checkbox"/> c. Employer
<b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b>  Name <input type="text" value="Local 136 pension fund"/>  Trade Name, if any: <input type="text"/>  P.O. Box, Bldg., Room No., if any <input type="text"/>  Street <input type="text" value="1820 Beach St."/>  City <input type="text" value="Broadview"/>  State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text" value="60155"/>	<b>11.a. Nature of such dealing.</b> <div><input type="text" value="Investment Consultant provides investment consulting services to the Local 136 Pension Fund"/></div> <b>11.b. Approximate dollar value of such dealing.</b> <input type="text" value="\$65,829"/>
	<b>12.a. Nature of interest held or income received.</b> <div><input type="text" value="Sponsored Lake Michigan Boat Ride with Wives."/></div> <b>12.b. Amount.</b> <input type="text" value="\$82"/>

Name of Person Filing Frank DiMarco	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name DiMeo Schneider &amp; Associates, L.L.C.</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 500 W. Madison Street, Suite #3855</p> <p>City Chicago</p> <p>State Illinois ZIP Code + 4 60661</p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name Local 136 pension fund</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 1820 Beach St.</p> <p>City Broadview</p> <p>State Hawaii ZIP Code + 4 60155</p>	<p>11.a. Nature of such dealing.</p> <p>Investment Consultant provides investment consulting services to the Local 136 Pension Fund</p> <p>11.b. Approximate dollar value of such dealing. \$65,828</p> <p>12.a. Nature of interest held or income received.</p> <p>International Foundation Meeting &amp; Seminar in New Orleans.</p> <p>12.b. Amount. \$41</p>

Name of Person Filing Frank DiMarco

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Westbrook Financial Services

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 188 Industrial Dr.

City Elmhurst

State Illinois ZIP Code + 4 60126

9. Business deals with:

☐ a. Labor Organization

☒ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Local 136 Health & Welfare Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1820 Beach St.

City Broadview

State Illinois ZIP Code + 4 60155

11.a. Nature of such dealing.

Agent for Humana Health Ins.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Christmas Gift (ham)

12.b. Amount.

\$50

Name of Person Filing Frank DiMarco

File Number U-

## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Co-America Bank

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City Oakbrook Terrace

State Illinois

ZIP Code + 4

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Mid-American Penison

Trade Name, if any: IronWorkers Tri-State Welfare Fund

P.O. Box, Bldg., Room No., if any

Street 2350 E. 170th Street

City Lansing

State Illinois

ZIP Code + 4 60438

## 11.a. Nature of such dealing.

Banking provides custodial services for the investments held by the Mid-America Pension fund.

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

Sponsord Chirstmas Dinner at Dictriect Council meetings

## 12.b. Amount.

\$80



## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Mid America Pension Fund

Trade Name, if any: IronWorkers Tri-State Welfare Fund

P.O. Box, Bldg., Room No., if any

Street 2350 E. 170th Street

City Lansing

State Illinois ZIP Code + 4 60438

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

Mid-America Pension Fund is an employee benefit fund related to Local Union #136

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

The Pension Fund paid \$318.30 in airfare, \$1,070.20 in hotel and \$895.34 in meals and other reimbursed expenses on my behalf for attending the International Foundation Employees Benefits Seminar in New Orleans, LA

## 12.b. Amount.

\$2,284

Name of Person Filing Frank DiMarco	File Number U-
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Part B Continuation Page

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<p>8. Name and address of Business (including trade name, if any).</p> <p>Name <input type="text" value="Lehman Brothers Asset Management LLC"/></p> <p>Trade Name, if any: <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text"/></p> <p>City <input type="text"/></p> <p>State <input type="text"/> ZIP Code + 4 <input type="text"/></p>	<p>9. Business deals with:</p> <p><input type="checkbox"/> a. Labor Organization</p> <p><input checked="" type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name <input type="text" value="Mid America Pension Fund"/></p> <p>Trade Name, if any: <input type="text" value="IronWorkers Tri-State Welfare Fund"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="2350 E. 170th Street"/></p> <p>City <input type="text" value="Lansing"/></p> <p>State <input type="text" value="Illinois"/> ZIP Code + 4 <input type="text"/></p>	<p>11.a. Nature of such dealing.</p> <p><input type="text" value="Asset Management"/></p> <p>11.b. Approximate dollar value of such dealing. <input type="text"/></p> <p>12.a. Nature of interest held or income received.</p> <p><input type="text" value="Meeting Dinner, Fund Professionals and Guests"/></p> <p>12.b. Amount. <input type="text" value="\$101"/></p>

## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Mark M. Pekay

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 30 N. LaSalle Street, Suite #2426

City Chicago

State Illinois ZIP Code + 4 60602

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Machinery Movers #136 - Penison Funds

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1820 Beach Street

City Broadview

State Illinois ZIP Code + 4 60155

## 11.a. Nature of such dealing.

Labor Lawyer &amp; Fund council

## 11.b. Approximate dollar value of such dealing.

\$48,518

## 12.a. Nature of interest held or income received.

Pen &amp; Pencil Set

## 12.b. Amount.

\$20

**Part B Continuation Page**

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<p><b>8. Name and address of Business (including trade name, if any).</b></p> <p>Name <input style="width: 80%;" type="text" value="James C. Franczyk, Jr. Att."/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text" value="Franczyk Sullivan P.C."/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text" value="300 S. Wacker Drive, Suite 3400"/></p> <p>City <input style="width: 80%;" type="text" value="Chicago"/></p> <p>State <input style="width: 20%;" type="text" value="Illinois"/> ZIP Code + 4 <input style="width: 20%;" type="text" value="60606"/></p>	<p><b>9. Business deals with:</b></p> <p><input checked="" type="checkbox"/> a. Labor Organization</p> <p><input type="checkbox"/> b. Trust</p> <p><input type="checkbox"/> c. Employer</p>
<p><b>10. If 9.b. or 9.c. is checked give trust or employer's name.</b></p> <p>Name <input style="width: 80%;" type="text" value="McCormick Place"/></p> <p>Trade Name, if any: <input style="width: 80%;" type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input style="width: 80%;" type="text"/></p> <p>Street <input style="width: 80%;" type="text" value="22nd &amp; Lake Shore Drive"/></p> <p>City <input style="width: 80%;" type="text" value="Chicago"/></p> <p>State <input style="width: 20%;" type="text" value="Illinois"/> ZIP Code + 4 <input style="width: 20%;" type="text"/></p>	<p><b>11.a. Nature of such dealing.</b></p> <div style="border: 1px solid black; height: 100px; padding: 5px; margin-top: 5px;">Labor Lawyer, McCormick Place.</div> <p><b>11.b. Approximate dollar value of such dealing.</b> <input style="width: 100px;" type="text"/></p> <p><b>12.a. Nature of interest held or income received.</b></p> <div style="border: 1px solid black; height: 150px; padding: 5px; margin-top: 5px;">Dinner Meeting At Gibson's Steake House Chicago, Illinois</div> <p><b>12.b. Amount.</b> <input style="width: 100px;" type="text" value="\$100"/></p>